



## Telephone Privacy

To assist our investigation, please complete both sides of this form as thoroughly as possible.

Mail your completed form to: Indiana Attorney General, Attn: Telephone Privacy, 5<sup>th</sup> Floor, Indiana Government Center South, 302 West Washington Street, Indianapolis, IN 46204-2770.

**\* Indicates information we *must* have to investigate your complaint**  
**Complaint Form**

### Your Information

\*Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

\*Mailing Address: \_\_\_\_\_ \*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_

Daytime Phone: (     ) \_\_\_\_\_ Evening Phone: (     ) \_\_\_\_\_

### Telephone Solicitor Information

\*Name of Firm: \_\_\_\_\_ Phone Number: (     ) \_\_\_\_\_

\*Date of Call: \_\_\_\_\_ \*Time of Call: \_\_\_\_\_ am pm  
(Circle one)

\*Product or Service Offered: \_\_\_\_\_ Name of Caller: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### About The Call

\*1. Residential telephone number the solicitor called: (     ) \_\_\_\_\_

2. Is this telephone number on Indiana's Telephone Privacy list? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. Was the call a recorded message? \_\_\_\_\_ Yes \_\_\_\_\_ No

4. Did you keep the solicitor's phone number or message on your Caller ID or other service? \_\_\_\_\_ Yes \_\_\_\_\_ No

5. Are you willing to testify in court regarding this complaint? \_\_\_\_\_ Yes \_\_\_\_\_ No

6. Are you willing to obtain records related to this call from your phone company? \_\_\_\_\_ Yes \_\_\_\_\_ No

## Statutory Exemptions

If you answer "Yes" to any of the following, Indiana law may not allow us to take enforcement action.

1. Did you ask to be contacted by the caller? \_\_\_\_\_ Yes \_\_\_\_\_ No

2. Was the call related to an existing debt or contract for which payment or performance had not been completed at the time of the call? \_\_\_\_\_ Yes \_\_\_\_\_ No

3. Was the telephone call made on behalf of a charitable organization? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, did the caller say he/she was:

\_\_\_ a volunteer of the charity?

\_\_\_ an employee of the charity?

\_\_\_ working for telemarketing firm?

\_\_\_ don't know.

4. Was the telephone call made by a real estate broker or real estate salesperson? \_\_\_\_\_ Yes \_\_\_\_\_ No

5. Was the telephone call made by an insurance agent soliciting the sale of an insurance product? \_\_\_\_\_ Yes \_\_\_\_\_ No

6. Was the telephone call soliciting the sale of a newspaper subscription? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, did the caller say he/she was:

\_\_\_ a volunteer?

\_\_\_ an employee of the newspaper?

\_\_\_ working for a telemarketing firm?

\_\_\_ don't know.

## Consent and Certification

**I CERTIFY THAT THE INFORMATION ON THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT THE INDIANA ATTORNEY GENERAL MAY DISCLOSE TO OTHERS THE INFORMATION ON THIS FORM. BY SIGNING BELOW, I CONSENT TO SUCH DISCLOSURE AT THE DISCRETION OF THE INDIANA ATTORNEY GENERAL.**

\*Your Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_